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UTILITY PATENT APPLICATION **TRANSMITTAL**

First Inventor or Application Identifier Michael D. Lammert

VIA FORMATION IN POLYMERS

(Only for new nonprovisional applications under 37 C.F.R. § 1.53(b)) Express Mail Label No. EF238909476US								
	APPLICATION ELEMENTS thapter 600 concerning utility patent application contents.	Assistant Commissioner for Patents ADDRESS TO: Box Patent Application Washington, DC, 20234	jo					
1. X * (S (P	Fee Transmittal Form (e.g., PTO/SB/17) Submit an original and a duplicate for fee processing) pecification [Total Pages] pecification [Total Pages] Descriptive title of the Invention Cross References to Related Applications Statement Regarding Fed sponsored R & D Reference to Microfiche Appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure rawing(s) (35 U.S.C. 113) [Total Sheets 3] Declaration [Total Pages 3] X Newly executed (original or copy) Copy from a prior application (37 C.F.R. § 1.63(c) (for continuation/divisional with Box 16 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §§ 1.63(d)(2) and 1.33(b). ITEMS 1 & 13 IN ORDER TO BE ENTITLED TO PAY SMALL ENTITY LLL ENTITY STATEMENT IS REQUIRED (37 C.F.R. § 1.27), EXCEPT DIN A PRIOR APPLICATION IS RELIED UPON (37 C.F.R. § 1.28).	Mashington DC 20231 5. Microfiche Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Copy b. Paper Copy (identical to computer copy) c. Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 7. X Assignment Papers (cover sheet & document(s)) 8. X 37 C.F.R.§3.73(b) Statement X Power of (when there is an assignee) 9. English Translation Document (if applicable) 10. X Information Disclosure Statement (IDS)/PTO-1449 11. Preliminary Amendment 12. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized) * Small Entity Statement filed in prior application of the computer of the comp	ation					
Prior app For CONTINU under Box 4b reference. Ti	ontinuation Divisional Continuation-in-part (Clobication information: Examiner JATION or DIVISIONAL APPS only: The entire disclosure of the accompany is considered a part of the disclosure of the accompany.	Group / Art Unit: If the prior application, from which an oath or declaration is supplied ng continuation or divisional application and is hereby incorporated as been inadvertently omitted from the submitted application parts. NCE ADDRESS or Correspondence address below	by					
City	State	Zip Code	\exists					
Country	Telephone	Fax						
Name (P	nnt/Type) Noel F. Heal							
Signature		Registration No. (Attorney/Agent) 26,074						

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FEE TRANS	MITTAL	Complete if Known						
		Application Number						
for FY 2	2000	Filing Date	October 30, 2001 Michael D. Lammert					
Patent fees are subject to a	nnual revision.	First Named Inventor						
Small Entity payments <u>must</u> be supported otherwise large entity fees must be paid.	See Forms PTO/SB/09-12.	Examiner Name	Unassigned					
See 37 C.F.R. §§ 1.27 and 1.28.		Group / Art Unit	N/A					
TOTAL AMOUNT OF PAYMENT	(\$)852.00	Attornov Docket No.	10 1000					

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)								
1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:		3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account 20-1515	Cod		Fee	Fee e (\$)	Fee	Description	on	Fee Paid	
Number 20-1313	105	130	205	65	Surcharge - late	e filing fee or	oath	0.00	
Deposit Account Name TRW Inc.	127	50	227	25	Surcharge - late cover sheet.	provisional i	filing fee or	0.00	
	139	130	139	130	Non-English sp		0.00		
Charge Any Additional Fee Required Under 37 CFR §§ 1 16 and 1 17	147	2,520	147	2,520	For filing a requ	ımination	0.00		
2. Payment Enclosed:	112	920*	112	920*	Requesting pub Examiner action	R prior to	0.00		
Check Money Other	113	1,840*	113	1,840	 Requesting pub Examiner action 	R after	0.00		
FEE CALCULATION	115	110	215	55	Extension for re			0.00	
1. BASIC FILING FEE	116	380		190	Extension for re			0.00	
Large Entity Small Entity	117	870	217		Extension for re			0.00	
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid		1,360	218	680	Extension for re			0.00	
101 690 201 345 Utility filling fee 740.00		1,850	228		Extension for re		n month	0.00	
106 310 206 155 Design filing fee	119	300	219		Notice of Appea		1	0.00	
107 480 207 240 Plant filing fee	120	300	220		Filing a brief in s Request for oral		appear	0.00	
108 690 208 345 Reissue filing fee	121 138	260 1.510	221 138	130	Petition to institu	•	se proceeding	0.00	
114 150 214 75 Provisional filing fee	140	110	240	55 55	Petition to revive	•		0.00	
SUBTOTAL (1) (\$) 740.00		1,210		605	Petition to revive			0.00	
2. EXTRA CLAIM FEES	142	1,210	242	605	Utility issue fee ((or reissue)		0.00	
Fee from Ext <u>ra Claims below Fee Paid</u>	143	430	243	215	Design issue fee	9		0.00	
Total Claims 24 -20** = 4	144	580	244	290	Plant issue fee	0.00			
Claims 2 2 1 Claims	122	130		130	Petitions to the 0	Commissione	г	0.00	
Multiple Dependent =0	123	50	123	50	Petitions related	to provisiona	l applications	0.00	
**or number previously paid, if greater, For Reissues, see below Large Entity Small Entity	126	240	126	240	Submission of Ir	nformation Di	sclosure Stmt		
Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each property (times r			0.00	
103 18 203 9 Claims in excess of 20	146	690	246	345	Filing a submissi	•	· /	40.00	
102 78 202 39 Independent claims in excess of 3	149	690	249	345	(37 CFR § 1.129 For each addition	∂(a))		0.00	
104 260 204 130 Multiple dependent claim, if not paid					examined (37 CI	FR § 1.129(b)))	0.00	
109 78 209 39 ** Reissue independent claims over original patent	Other fo	ee (spe	ecify)					0.00	
110 18 210 9 ** Reissue claims in excess of 20 and over original patent	Other fo	ee (spe	ecify)					0.00	
SUBTOTAL (2) (\$) 72.00 • Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 40.00									
SUBMITTED BY Complete (if applicable)									
Name (Pnnt/Type) Noel F. Heal ,		Registra Attorney		0. 2	6,074	Telephone	310-812-	4910	
Signature Mare The 10/30/01									
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